



## **DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN**

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November 21, 2005

### **DENTAL BULLETIN**

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#### **DENTAL HYGIENISTS POLICY CLARIFICATION**

The dental bulletin dated August 18, 2004 defined the relationship of a dental hygienist practicing in a public health setting without supervision.

Further clarification of the policy is as follows:

- A duly registered and currently licensed dental hygienist who has been in practice at least three years and who is practicing in a public health setting may provide fluoride treatments, teeth cleaning, and sealants, if appropriate to children who are eligible for medical assistance, pursuant to chapter 208, RSMo, without the supervision of a dentist. This provision shall expire on August 28, 2006.
- The public health settings have been defined as:
  1. Department of Health and Senior Services;
  2. A county health department;
  3. A city health department operating under a city charter;
  4. A combined city/county health department; or
  5. A non-profit community health center qualified as exempt from a federal taxation under section 501(c)(3) of the *Internal Revenue Code* including a community health center that receives funding authorized by sections 329, 330, and 340 of the "United States Public Health Services Act."
- For the purposes of this bulletin, the term practicing is defined as employed by or contracted to provide services on behalf of the public health entities listed above.

**DENTAL BULLETIN CORRECTIONS**

In the dental bulletin Volume 26, Number 14, dated September 28, 2005, procedure code D4220 was included in Attachment B by error. D4220 is not a valid procedure code and cannot be billed as a support code.

Procedure code D7261 (Primary closure of sinus perforation) was inadvertently omitted from Attachment A. This procedure may be billed for adults if the service is related to a trauma or for treatment of a medical condition without which the health of the individual would be adversely affected.

**Provider Bulletins** are available on the DMS Website at <http://www.dss.mo.gov/dms/pages/bulletins.htm>. Bulletins will remain on the Published Bulletin site only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

**Missouri Medicaid News:** Providers and other interested parties are urged to go to the DMS Website at <http://dss.missouri.gov/dms/subscribe/MedNewsSubscribe.htm> to subscribe to the list serve to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via e-mail.

**MC+ Managed Care:** The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline**  
**573-751-2896**